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APPLICATION NO.	FI	LING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/803,257	(03/09/2001	Oliver W. Gamble	3670-4002	7057
	7590	04/02/2004		EXAM	INER
OLIVER W	. GAMB	LE	CHOW, MING		
436 EAST 7		= =	ART UNIT	PAPER NUMBER	
NEW YORK, NY 10021				ARTONII	FAFER NUMBER
				2645	7
				DATE MAILED: 04/02/2004	4

Please find below and/or attached an Office communication concerning this application or proceeding.

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·/	Application No.	Applicant(s)					
Interview Summary	09/803,257	GAMBLE, OLIVER W.					
•	Examiner	Art Unit					
	Ming Chow	2645					
All participants (applicant, applicant's representative, PTO personnel):							
(1) Ming Chow.	(3)						
(2) <u>Oliver Gamble</u> .	(4)						
Date of Interview: 31 March 2004.							
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) applicant's representative]					
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.						
Claim(s) discussed: 1.							
Identification of prior art discussed:							
Agreement with respect to the claims f) was reached. g)⊠ was not reached. h)□ N	/A.					
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Applicant reviewed some proposals of amendments</u> .							
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)							
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.							

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required